application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

| | | PART I) | (Column 2) | | | Small entity | | | other Small (| · | | |
|--|--|--|-------------------|--------------------|----------------------------------|------------------|------|---------------|------------------------|---------------------|---------------------|------------------------|
| то | TAL CLAIMS | | 22 | | | | | RATE | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 355.00 | OR | Basic Fee | 710.00 |
| TO | TOTAL CHARGEABLE CLAIMS 27 minus | | | | 20= 7 | | | X\$ 9= | | OR | X\$18= | 126,- |
| MD | ndependent claims 3= | | | | | 3.74 | | X40= | | OR | X80= | |
| CO D | LTIPLE DEPENI | | | | +135= | 391 | OR | +270 = | | | | |
| • 16 | ° If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | |) 1 | TOTAL | 836. |
| Claims as amended - part 11 | | | | | | | | | | | SMAL. | TKAN . |
| ENT A | | CLAUS REWAINING AFTER AMENDMENT | ivairing After | | REST COUSLY OFOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| MENDONENT | Total | 6 | Minus: | ΔΦ | 9 | | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | 0 | Minus | 000 | | | | X40= | | OR | X80= | |
| | First presentation of multiple dependent claim. | | | | | | | ⊹135 = | | OR | ÷270= | |
| TOTAL ADDIT. FEE (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| EMT B | | CLANUS DEMINIOUS AFTER AMENDMENT | | RIG NUI PREV | NESV VIBER IOUSLY D FOR | PRESENT | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Tate: | ۵ | vinus | 90 " | | = | | X\$ 9= | | OR | X\$18= | |
| WW.E | inconcopi inconcopi | | | | T 01 0100 | | | X40= | | OR | X80= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= | | | | | | | | | | OR | +270= | |
| TOTAL ADDIT. FEE | | | | | | | | | OR | YOYAL ADDIT. FEE | | |
| | | (Column 1) | | (Colu | umn 2) | (Column 3 | | Care . | | | | |
| ENT C | | CLAIVIS REMAINING AFTER AMENDMENT | | NU | HEST MBER MOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NON | Total | A | Minus | 00 | | = | | X\$ 9= | | OR | X\$18= | , ; |
| AMENDMENT | Independent | ٥ | Minus | *** | | = | X40= | | OR | X80= | | |
| | FIRST PRESE | ENTATION OF N | AULTIPLE DEF | PENDER | NT CLAIM | | | +135= | 1 | OR | +270= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. *** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ***This will have not proviously Paid F or IN THIS SPACE is less than 3, enter "3." **This will have proviously Paid For (Total or Independent) is the highest number found in the appropriate box in | | | | | | | | | | | TOTAL ADDIT. FEE | |